



INTERNSHIP APPLICATION
 (Please type or print in black ink.)

Please complete the following information:

Full Name:

Your Legal Name	Last Name	First Name	Middle I
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Email: _____

CURRENT OR MOST RECENT UNIVERSITY/COLLEGE: _____

City/State: _____ **Degree/Major:** _____

Expected Graduation Date: _____ **Minor (if applicable):** _____ **GPA:** _____

Current Address:	Permanent Address (if applicable):
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Street:	Street:
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Apt./P.O. Box	Apt./P.O. Box
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City:	City:
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State/Province:	State/Province:
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Zip/Postal Code:	Zip/Postal Code:
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PHONE NUMBER _____ **CELL NUMBER:** _____

How did you hear about the Northern California Center for Well-Being? _____

Please indicate your open availability to intern:

Day/Time	Monday	Tuesday	Wednesday	Thursday	Friday
Morning					
Afternoon					
Evening					

Please respond to all of the following questions. You may answer each question separately or, you may respond with one comprehensive essay. Please do not exceed two pages total. (You may answer the questions on a separate sheet and attach it to the application)

1. Why do you want to become an intern for the Northern California Center for Well Being?

2. What personal characteristics, skill-sets and/or experiences do you possess/have you had that will help you to serve effectively as an intern for NCCWB?

3. What challenges do you anticipate during your internship? How might you address those challenges?

4. What do you hope to gain personally from your NCCWB Internship experience? What do you hope to contribute to the organization?

5. What is the single most important thing about you that NCCWB staff should know as they evaluate your application to become an Intern?

Please indicate your 1st, 2nd, and 3rd Intern preference:

___ **Active Play Everyday Program:** Under the Playworks Model, interns will promote healthy kids through active play recess in schools

___ **SNAP-Ed:** Interns will attend nutrition education presentations and assist in Promotora de Salud community nutrition presentations

___ **Communications & Marketing:** Assist with special events, daily office operations and provider communication while implementing new marketing strategies.

___ **Health Education Classes:** Class materials preparation, client communication, and class closeout

___ **Special Events:** Interns will participate in community planning and preparation for annual NCCWB events which include the Skate-A-Thon, Human Race and Celebration of Dreams

___ **Marketing/Outreach:** Surveying clinicians regarding needs and filling requests for center literature and class flyers.

___ **Newsletter:** Interns will assist in designing, writing and producing the Center newsletter.

Additionally, please attach the following documents:

1. Cover letter and Resume
2. 2-3 References
3. Unofficial transcripts

Please send your application to ONE of the three options:

1. E-mail: info@nccwb.org (Please put INTERNSHIP APPLICATION for (your name) in subject line)
2. Mail: Northern California Center For Well Being
365 B Tesconi Circle
Santa Rosa, CA 95401
3. Fax: (707) 575-1060

Thank you for your interest!